

STATE OF SOUTH CAROLINA

(Caption of Case)
IN RE:**RECEIVED**

JUN 24 2021

APPLICATION OF AIR VOICE WIRELESS, LLC
D/B/A FEELSAFE WIRELESS FOR
DESIGNATION AS AN ELIGIBLE
TELECOMMUNICATIONS CARRIER
IN THE STATE OF SOUTH CAROLINAPSCSC
Clerks OfficeBEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA

COVER SHEET

DOCKET 2020-14-C
NUMBER: 2014-350-C

(Please type or print)

Submitted by: Victoria Martin

SC Bar Number: _____

Address: 1725 Windward Concourse, Suite 150
Alpharetta, Georgia 30005Telephone: (678)672-2831Fax: (770)232-9208

Other: _____

Email: etc@telecomcounsel.com

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

DOCKETING INFORMATION (Check all that apply)☐ Emergency Relief demanded in petition ☐ Request for item to be placed on Commission's Agenda expeditiously☐ Other: _____

INDUSTRY (Check one)	NATURE OF ACTION (Check all that apply)			
<input type="checkbox"/> Electric	<input type="checkbox"/> Affidavit	<input type="checkbox"/> Letter	<input type="checkbox"/> Request	
<input type="checkbox"/> Electric/Gas	<input type="checkbox"/> Agreement	<input type="checkbox"/> Memorandum	<input type="checkbox"/> Request for Certification	
<input type="checkbox"/> Electric/Telecommunications	<input type="checkbox"/> Answer	<input type="checkbox"/> Motion	<input type="checkbox"/> Request for Investigation	
<input type="checkbox"/> Electric/Water	<input type="checkbox"/> Appellate Review	<input type="checkbox"/> Objection	<input type="checkbox"/> Resale Agreement	
<input type="checkbox"/> Electric/Water/Telecom.	<input type="checkbox"/> Application	<input type="checkbox"/> Petition	<input type="checkbox"/> Resale Amendment	
<input type="checkbox"/> Electric/Water/Sewer	<input type="checkbox"/> Brief	<input type="checkbox"/> Petition for Reconsideration	<input type="checkbox"/> Reservation Letter	
<input type="checkbox"/> Gas	<input type="checkbox"/> Certificate	<input type="checkbox"/> Petition for Rulemaking	<input type="checkbox"/> Response	
<input type="checkbox"/> Railroad	<input type="checkbox"/> Comments	<input type="checkbox"/> Petition for Rule to Show Cause	<input type="checkbox"/> Response to Discovery	
<input type="checkbox"/> Sewer	<input type="checkbox"/> Complaint	<input type="checkbox"/> Petition to Intervene	<input type="checkbox"/> Return to Petition	
<input checked="" type="checkbox"/> Telecommunications	<input type="checkbox"/> Consent Order	<input type="checkbox"/> Petition to Intervene Out of Time	<input type="checkbox"/> Stipulation	
<input type="checkbox"/> Transportation	<input type="checkbox"/> Discovery	<input type="checkbox"/> Prefiled Testimony	<input type="checkbox"/> Subpoena	
<input type="checkbox"/> Water	<input type="checkbox"/> Exhibit	<input type="checkbox"/> Promotion	<input type="checkbox"/> Tariff	
<input type="checkbox"/> Water/Sewer	<input type="checkbox"/> Expedited Consideration	<input type="checkbox"/> Proposed Order	<input type="checkbox"/> Other:	
<input type="checkbox"/> Administrative Matter	<input type="checkbox"/> Interconnection Agreement	<input type="checkbox"/> Protest		
<input type="checkbox"/> Other:	<input type="checkbox"/> Interconnection Amendment	<input type="checkbox"/> Publisher's Affidavit		
	<input type="checkbox"/> Late-Filed Exhibit	<input checked="" type="checkbox"/> Report		

Lance J.M. Steinhart, P.C.

Attorneys At Law
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Alpharetta, Georgia 30005

Also Admitted in New York
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Telephone: (770) 232-9200
Facsimile: (770) 232-9208

June 23, 2021

VIA FEDERAL EXPRESS

Chief Clerk of the Commission
South Carolina Public Service Commission
101 Executive Center Drive, Suite 100
Columbia, South Carolina 29210
(803) 896-5100

Re: Air Voice Wireless, LLC d/b/a FeelSafe Wireless
Docket Nos. ~~2020~~ 14-C; 2014-350-C
2021


Dear Sir/Madam:

Pursuant to Order No. 2014-888 in the above-referenced docket, enclosed please find for filing the Company's ETC Annual Report.

AR
6/25/21 I have enclosed an extra copy of this letter to be date-stamped and returned to me in the self-addressed, postage prepaid envelope I have provided.

If you have any questions or if I may provide you with any additional information, please do not hesitate to contact me.

Respectfully submitted,


Lance J.M. Steinhart, Esq.
Managing Attorney
Lance J.M. Steinhart, P.C.
Attorneys for Air Voice Wireless, LLC d/b/a FeelSafe Wireless

Enclosures

cc: ORS via USPS (2 copies)

**BEFORE
THE PUBLIC SERVICE COMMISSION OF
SOUTH CAROLINA**

DOCKET NO. 2014-350-C

**ETC ANNUAL REPORT OF AIR VOICE WIRELESS, LLC D/B/A FEELSAFE
WIRELESS**

Pursuant to 26 S.C. Code Ann. Regs. 103-690.1 and Order No. 2014-888, Air Voice Wireless, LLC d/b/a FeelSafe Wireless (“Air Voice” or “the Company”), by undersigned counsel, hereby submits its 2021 Eligible Telecommunications Carrier (“ETC”) Annual Report and respectfully requests that the South Carolina Public Service Commission (“Commission”) certify the Company’s continued eligibility to receive federal low-income support for the 2022 calendar year. Air Voice submits the following in compliance with 26 S.C. Code Ann. Regs. 103-690.1:

I. Certification of compliance with CTIA Consumer Code (103-690.1(B)(a))

The Company certifies that it is in compliance with the CTIA Consumer Code for Wireless Service, as it is required to do pursuant to 47 C.F.R. § 54.202(a)(3). See also Exhibit A.

II. Lifeline Reporting

103-690.1(b)(3) - Requests for service that were unfulfilled

The Company is unaware of any unfulfilled requests for service from Lifeline-eligible customers for the prior calendar year.

103-690.1(b)(4) - Number of complaints per 1,000 handsets

The Company had 0 complaints per 1,000 handsets in the prior calendar year.

103-690.1(b)(5) - Certification of compliance with applicable service quality standards and consumer protection rules

The Company certifies that it is in compliance with all applicable service quality and consumer protection requirements and standards, including the CTIA Consumer Code for Wireless Service. See also Exhibit A.

103-690.1(b)(6) - Certification of ability to function in emergency situations

The Company provides service by reselling the network services of AT&T Wireless (“AT&T”) and certifies that it is able to remain functional in emergency situations based on 47 C.F.R. § 54.202(a)(2). The Company relies on AT&T’s network reliability in all situations, including emergency situations. Through its agreement with AT&T, Air Voice provides to its customers the same ability to remain functional in emergency situations as currently provided by AT&T to its own customers, including access to a reasonable amount of back-up power to ensure functionality without an external power source, the ability to reroute traffic around damaged facilities, and the capability of managing traffic spikes resulting from emergency situations.

103-690.1(b)(7) - Certification regarding provision of comparable local usage plan

The Company certifies that it offers a local usage plan comparable to that offered by the incumbent LEC (“ILEC”) in the relevant service areas. The Company’s offering exceeds those of the ILEC in several respects. The Company offers customers a certain amount of service free of charge. Air Voice customers can use these free minutes to place calls statewide (and even nationwide) because the Company does not constrict customers’ use by imposing a local calling area requirement. The Company also provides Lifeline customers with E911 capabilities and access to voice mail, caller I.D., and call waiting services at no cost. Air Voice’s Lifeline rate plans can be found at <https://www.feelsafewireless.com/terms-of-service>.

103-690.1(b)(8) - Certification regarding equal access

The requirement to provide equal access to long-distance carriers in the event that no other ETC is providing equal access within its designated service area has been eliminated from federal rules governing ETC designation. As such, the Company believes this requirement to no longer be applicable.


103-690.1(b)(9) - Number of Lifeline customers

The Company had 212 Lifeline customers as of December 31 of the prior year.

103-690.1(b)(10) - Copies of responses to the Lifeline Verification Survey or Certification filed with USAC

The Company has previously filed with the Commission a copy of its most recent Annual Lifeline Certification (Form 555) filed with the Universal Service Administrative Company ("USAC"). See attached Exhibit B for a copy of Air Voice's FCC Annual Report (Form 481).

Respectfully submitted,



Lance J.M. Steinhart
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 (770) 232-9208 (Fax)
 E-Mail: lsteinhart@telecomcounsel.com

*Attorneys for Air Voice Wireless, LLC d/b/a
 FeelSafe Wireless*

June 21, 2021

EXHIBIT A

CERTIFICATION

AFFIDAVIT

STATE OF MICHIGAN)

)

COUNTY OF OAKLAND)

)

Personally came and appeared before me, the undersigned Notary, the within named Jim Bahri, CEO of Air Voice Wireless, LLC d/b/a FeelSafe Wireless ("the Company"), and makes this his statement and Affidavit upon oath and affirmation of belief and personal knowledge that the matters, fact and things set forth in the foregoing report are true and correct to the best of his knowledge.



Jim Bahri, CEO

Air Voice Wireless, LLC d/b/a FeelSafe Wireless

SWORN TO and subscribed before me, the undersigned Notary Public, the 14th day of June, 2021

My Commission expires 5/27/2024


Notary Public

CAROLYN J WILHELM
NOTARY PUBLIC - MICHIGAN
OAKLAND COUNTY
MY COMMISSION EXPIRES 05/27/2024
ACTING IN OAKLAND COUNTY

EXHIBIT B
FCC Form 481

FCC Form 481 - Carrier Annual Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 December 2020
<010> Study Area Code	249027	
<015> Study Area Name	Airvoice Wireless LLC	
<020> Program Year	2022	
<030> Contact Name: Person USAC should contact with questions about this data	Melissa Kallabat	
<035> Contact Telephone Number: Number of the person identified in data line <030>	2482391061 ext.	
<039> Contact Email Address: Email of the person identified in data line <030>	Mkallabat@airvoicewireless.com	
Form Type	54.422	

(200) Service Outage Reporting (Voice)
Data Collection Form

<010>	Study Area Code	249027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2022
<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kallabat
<035>	Contact Telephone Number - Number of person identified in data line <030>	2482391061 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Mkallabat@airvoicewireless.com

[illegible]

(400) Number of Complaints per 1,000 customers
Data Collection Form

FCC Form 481
OMB Control No. 3060-0946/OMB Control No. 3060-0819
December 2020

<010>	Study Area Code	249027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2022
<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kallabat
<035>	Contact Telephone Number - Number of person identified in data line <030>	2482391063 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mkallabat@airvoicewireless.com
<400>	Select from the drop-down list to indicate how you would like to report voice complaints (zero or greater) for voice telephony service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.	
<410>	Complaints per 1000 customers for fixed voice	
<420>	Complaints per 1000 customers for mobile voice	

(500) Compliance With Service Quality Standards and Consumer Protection Rules Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 December 2020
<010>	Study Area Code	249027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2022
<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kajlaba
<035>	Contact Telephone Number - Number of person identified in data line <030>	2482391061 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mkajlaba@airvoicewireless.com
<515>	Certify compliance with applicable minimum service standards	

**(600) Functionality in Emergency Situations
Data Collection Form**

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
December 2020

<010>	Study Area Code	249922
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2022
<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kallabot
<035>	Contact Telephone Number - Number of person identified in data line <030>	2482391061 ext
<039>	Contact Email Address - Email Address of person identified in data line <030>	mkallabot@airvoicewireless.com
<600>	Certify compliance regarding ability to function in emergency situations	
<610>	Descriptive document for Functionality in Emergency Situations	

(800) Operating Companies Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 December 2020	
<010>	Study Area Code	249027	
<015>	Study Area Name	Airvoice Wireless LLC	
<020>	Program Year	2022	
<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kallabat	
<035>	Contact Telephone Number - Number of person identified in data line <030>	2482591061 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	Mkallabat@airvoicewireless.com	
<810>	Reporting Carrier	Airvoice Wireless, LLC	
<811>	Holding Company	Not Applicable	
<812>	Operating Company	Not Applicable	

[illegible]

(900) Tribal Lands Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 December 2020
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<010>	Study Area Code	249027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2022
<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kallabat
<035>	Contact Telephone Number - Number of person identified in data line <030>	2482391061 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Mkallabat@airvoicewireless.com

<900> Does the filing entity offer tribal land services? (Y/N)

<910> Tribal Land(s) on which ETC Serves

<920> Tribal Government Engagement Obligation

Name of Attached Document

If your company serves Tribal lands, please select (Yes, No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(5) includes:

- <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions.
- <922> Feasibility and sustainability planning.
- <923> Marketing services in a culturally sensitive manner;
- <924> Compliance with Rights of way processes
- <925> Compliance with Land Use permitting requirements
- <926> Compliance with Facilities Siting rules
- <927> Compliance with Environmental Review processes
- <928> Compliance with Cultural Preservation review processes
- <929> Compliance with Tribal Business and Licensing requirements.

Select Yes or No or Not Applicable

(1000) Voice and Broadband Service Rate Comparability Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 December 2020	
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<010>	Study Area Code	249027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2022
<030>	Contact Name - Person USAC should contact regarding this data	
<035>	Contact Telephone Number - Number of person identified in data line <030>	Melissa Kallabat 2482391061 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Mkallabat@airvoicewireless.com

<1000> Voice services rate comparability certification

<1010> Attach detailed description for voice services rate comparability compliance

Name of Attached Document

<1020> Broadband comparability certification

<1030> Attach detailed description for broadband comparability compliance

Name of Attached Document

(1100) No Terrestrial Backhaul Reporting		FCC Form 481	
Data Collection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819	
		December 2020	

<010>	Study Area Code	249027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2022
<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kallabat
<035>	Contact Telephone Number - Number of person identified in data line <030>	2482391061 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Mkallabat@airvoicewireless.com

<1100>	Certify whether terrestrial backhaul options exist (Y/N)	
--------	--	--

<1130>	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(g).	
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<1140>	Alaska Plan rate-of-return certification (yes, no, or not applicable) of compliance with approved performance plan.	
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(1200) Terms and Condition for Lifeline Customers

Lifeline

Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
December 2020

<010>	Study Area Code	249027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2022
<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kallabat
<035>	Contact Telephone Number - Number of person identified in data line <030>	2402391061 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Mkallabat@airvoicewireless.com

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

Name of Attached Document

<1220> Link to Public Website

HTTP <http://www.feelsafe wireless.com/DesktopSouthCarolina.aspx>

"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

<1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, ☒

<1222> Details on the number of minutes provided as part of the plan, ☒

<1223> Additional charges for toll calls, and rates for each such plan. ☒

(2005) Price Cap Carrier Additional Documentation		FCC Form 481
Data Collection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819
Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers		December 2020
<010> Study Area Code	249027	
<015> Study Area Name	Airvoice Wireless LLC	
<020> Program Year	2022	
<030> Contact Name - Person USAC should contact regarding this data	Melissa Kallabat	
<035> Contact Telephone Number - Number of person identified in data line <030>	2482391061 ext.	
<039> Contact Email Address - Email Address of person identified in data line <030>	Mkallabat@airvoicewireless.com	

Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR 54.313(c),(d),(e). The information reported on this form and in the documents attached below is accurate.

<2015> 2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)

Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}

<2016> Certification support used to build broadband

Connect America Phase II Reporting {47 CFR § 54.313(e)}

<2017A> Connect America Fund Phase II recipient?

<2017C> Total amount of Phase II support, if any, the price cap carrier used for capital expenditures in 2018.

<2018> Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(1)(ii)(A)

Name of Attached Document Listing
Required Information

Connect America Phase II – FCC Form 470 Postings

<2019> For the filing due July 1 following full implementation of this requirement, answer yes, no, or not applicable to this certification request

(3005) Rate Of Return Carrier Additional Documentation
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819
December 2020

<010> Study Area Code 249027

<015> Study Area Name Airvoice Wireless LLC

<020> Program Year 2022

<030> Contact Name - Person USAC should contact regarding this data

Melissa Kallabat

<035> Contact Telephone Number - Number of person identified in data line <030>

2482391061 ext.

<039> Contact Email Address - Email Address of person identified in data line <030>

Mkallabat@airvoicewireless.com

(3007) Does this filing retain a Cost Consultant and/or Firm, or other Third Party to prepare financial and operations data disclosures submitted to the National Exchange Carrier Association (NECA), USAC, or the Administrator?

(3007a) Name of Consultant	(3007b) Name of Consultant Firm/Third Party

<010>	Study Area Code	249027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2022
<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kallabat
<035>	Contact Telephone Number - Number of person identified in data line <030>	2482391061 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Mkallabat@airvoicewireless.com

Select from the drop down menu or check the boxes below to note compliance with 54.313(f)(1). Privately held carriers must ensure compliance with the financial reporting requirements set forth in 47 CFR 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3009)	Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)	
(3010A)	Certification of Public Interest Obligations (47 CFR § 54.313(f)(1)(i))	
(3010B)	Please Provide Attachment Rate-of-Return Community Anchor Institutions	Name of Attached Document Listing Required Information <input type="text"/>
(3012A)	Indicate if the carrier newly deployed broadband service to community anchor institution(s) in the previous calendar year.	
(3012B)	Please Provide Attachment Using link, download template and list the number, name and address for each community anchor institution. Attach the document which contains the community anchor institution details as required by 47 C.F.R. § 54.313(f)(1)(ii)	Name of Attached Document Listing Required Information <input type="text"/>
(3013)	Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2))	(Yes/No) <input type="radio"/> <input type="radio"/>
(3014)	If yes, does your company file the RUS annual report Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:	(Yes/No) <input type="radio"/> <input type="radio"/>
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)	<input type="checkbox"/>
(3016)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows	<input type="checkbox"/>
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Document Listing Required Information <input type="text"/>
(3018)	If the response is no on line 3014, is your company audited? If the response is yes on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:	(Yes/No) <input type="radio"/> <input type="radio"/>
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers	<input type="checkbox"/>
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows	<input type="checkbox"/>
(3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit. If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:	<input type="checkbox"/>
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers	<input type="checkbox"/>
(3023)	Underlying information subjected to a review by an independent certified public accountant	<input type="checkbox"/>
(3024)	Underlying information subjected to an officer certification.	<input type="checkbox"/>
(3025)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows	<input type="checkbox"/>
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information <input type="text"/>

(3005) Rate Of Return Carrier Additional Documentation (Continued)

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
December 2020

Data Collection Form

<010>	Study Area Code	249027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2022
<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kallabat
<035>	Contact Telephone Number - Number of person identified in data line <030>	2482391061 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	MKallabats@voicewireless.com

Financial Data Summary

(3027) Revenue

(3028) Operating Expenses

(3029) Net Income

(3030) Telephone Plant In Service (TPIS)

(3031) Total Assets

(3032) Total Debt

(3033) Total Equity

(3034) Dividends

(4005) Rural Broadband Experiment Additional Documentation
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

December 2020

<010>	Study Area Code	249027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2022
<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kallabot
<035>	Contact Telephone Number - Number of person identified in data line <030>	XXXXXXXXXX
<039>	Contact Email Address - Email Address of person identified in data line <030>	Mkallabot@airvoicewireless.com

4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations and provide a list of newly served community anchor institutions.

Public Interest Obligations – FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

4001. Recipient certifies that it is offering broadband meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas.

RBE Community Anchor Institutions

<4003a> Indicate if the carrier newly deployed broadband service to community anchor institution(s) in the previous calendar year

<4003b> Please Provide Attachment: Using [link](#), download template and list the number, name and address for each community anchor institution. Attach the document which contains the community anchor institution details as required by FCC 14-98 (paragraph 79)

Name of Attached Document Listing Required Information

<010>	Study Area Code	249027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2022
<030>	Contact Name - Person USAC should contact regarding this data	Heliana Kallabat
<035>	Contact Telephone Number - Number of person identified in data line <030>	2422271061 ext
<039>	Contact Email Address - Email Address of person identified in data line <030>	HKallabat@airvoicewireless.com

(5011)	Please indicate whether any terrestrial backhaul or other satellite backhaul became commercially available in the previous calendar year in areas previously served exclusively by performance-limiting satellite backhaul.	(Yes/No)
--------	---	----------

If the filing carrier identified in its approved performance plans that it relies exclusively on satellite backhaul for a certain portion of the population in its service area, indicate whether any terrestrial backhaul or other satellite backhaul became commercially available in the previous calendar year in areas that were previously served exclusively by satellite backhaul. (Yes/No)

[illegible]

**(6005) Phase II Auction Reporting
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

December 2020

<010>	Study Area Code	249027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2022
<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kallabot
<035>	Contact Telephone Number - Number of person identified in data line <030>	2142271001 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Mkallabot@airvoicewireless.com

<6010> Enter the total amount of Phase II Auction Support, if any, the carrier used for capital expenditures

Phase II Auction and New York Funds Certification

<6011> Certify (either yes or no) regarding whether the recipient has available funds for all project costs that will exceed the amount of support that will be received for the next calendar year. This certification must be provided starting the first July 1st after receiving support until the recipient's penultimate year of support (Yes/No)

Phase II Auction Community Anchor Institutions

<6012a> Indicate if the carrier newly deployed broadband service to community anchor institution(s) in the previous calendar year

<6012b> Please Provide Attachment Using link, download template and list the number, name and address for each community anchor institution. Attach the document which contains the community anchor institution details as required by FCC 14-98 (paragraph 79)

Name of Attached Document Listing Required Information

Phase II Auction FCC Form 470 Postings

<6013> For the filing due July 1 following full implementation of this requirement answer yes or no to this certification request

Phase II Auction Post-Final Deployment Milestone Performance Certification

<6014> Starting the first July 1st after meeting the final service milestone, certify (yes or no) that the Phase II-funded network that the Phase II auction recipient operated in the prior year meets the relevant performance requirements in § 54.309

(7005) Phase-Down Support Reporting
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

December 2020

<010>	Study Area Code	249027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2022
<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kallabat
<035>	Contact Telephone Number - Number of person identified in data line <030>	20229106188
<039>	Contact Email Address - Email Address of person identified in data line <030>	MKallabat@airvoicewireless.com

<7010> Phase II Auction recipient performance requirements certification {Yes/No}

(8005) Uniendo a Puerto Rico Fixed and Mobile Funds Certification
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

December 2020

<010>	Study Area Code	247027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2022
<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kallabat
<035>	Contact Telephone Number - Number of person identified in data line <030>	762277067 Ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mkallabat@airvoicewireless.com

<8010> Uniendo a Puerto Rico Stage 2 Fixed – Capital Expenditures

Enter the total amount of Uniendo a Puerto Rico Stage 2 fixed support, if any, the carrier used for capital expenditures.

<8011> Uniendo a Puerto Rico Stage 2 Fixed – Available Funds Certification

Certify (either yes or no) regarding whether the recipient has available funds for all project costs that will exceed the amount of support that will be received for the next calendar year. This certification must be provided starting the first July 1st after receiving support until the recipient's penultimate year of support.

<8012a> Uniendo a Puerto Rico Stage 2 Fixed – Community Anchor Institutions

Indicate if the carrier newly deployed broadband service to community anchor institution(s) in the previous calendar year.

Please Provide Attachment

<8012b> Using link, download template and list the number, name and address for each community anchor institution. Attach the document which contains the community anchor institution details as required by 47 C.F.R. § 54.313(e)(2)(A). Allowable File Types.

Name of Attached Document Listing Required Information

Uniendo a Puerto Rico Stage 2 Fixed – FCC Form 470 Postings

<8013> For the filing due July 1 following full implementation of this requirement answer yes, no, or not applicable to this certification request.

<8014> Uniendo a Puerto Rico Stage 2 Fixed – Post-Final Deployment Milestone Performance Certification

Starting the first July 1st after meeting the final service milestone, certify (yes or no) that the Uniendo a Puerto Rico Stage 2-funded network that the Stage 2 recipient operated in the prior year meets the relevant performance requirements in § 54.309.

<8020> Uniendo a Puerto Rico Stage 2 Fixed – Support Reimbursement Certification

54.313(n): Recipients of Uniendo a Puerto Rico Fund Stage 2 fixed support shall certify that such support was not used for costs that are (or will be) reimbursed by other sources of support, including of federal or local government aid or insurance reimbursements; and that support was not used for other purposes, such as the retirement of company debt unrelated to eligible expenditures, or other expenses not directly related to network restoration, hardening, and expansion consistent with the framework of the Uniendo a Puerto Rico Fund.

<8030> Uniendo a Puerto Rico Stage 2 Fixed – Disaster Preparedness and Response Documentation

54.313(n): Recipients of fixed support from Stage 2 of the Uniendo a Puerto Rico Fund shall certify that they have conducted an annual review of the documentation required by section 54.1515(a)-(c) to determine the need for and to implement changes or revisions to disaster preparation and recovery documentation.

<8040> Uniendo a Puerto Rico Stage 2 Mobile – Support Reimbursement

54.313(n): Recipients of Uniendo a Puerto Rico Fund Stage 2 mobile support shall certify that such support was not used for costs that are (or will be) reimbursed by other sources of support, including of federal or local government aid or insurance reimbursements; and that support was not used for other purposes, such as the retirement of company debt unrelated to eligible expenditures, or other expenses not directly related to network restoration, hardening, and expansion consistent with the framework of the Uniendo a Puerto Rico Fund.

<8050> Uniendo a Puerto Rico Stage 2 Mobile – Disaster Preparedness and Response Documentation

54.313(n): Recipients of mobile support from Stage 2 of the Uniendo a Puerto Rico Fund shall certify that they have conducted an annual review of the documentation required by section 54.1515(a)-(c) to determine the need for and to implement changes or revisions to disaster preparation and recovery documentation

<8060> Uniendo a Puerto Rico Stage 2 Mobile – Mobile Disbursements Certification

54.313(o): Recipients of Uniendo a Puerto Rico Fund Stage 2 mobile support shall certify that they are in compliance with all requirements for receipt of such support to continue receiving Stage 2 mobile disbursements

<010>	Study Area Code	249927
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2022
<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kallabat
<035>	Contact Telephone Number - Number of person identified in data line <030>	240291061 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Mkallabat@airvoicewireless.com

<9010> Connect USVI Stage 2 Fixed – Capital Expenditures

Enter the total amount of Connect USVI Fund Stage 2 fixed support, if any, the carrier used for capital expenditures.

<9011> Connect USVI Stage 2 Fixed – Available Funds Certification

Certify (either yes or no) regarding whether the recipient has available funds for all project costs that will exceed the amount of support that will be received for the next calendar year. This certification must be provided starting the first July 1st after receiving support until the recipient's penultimate year of support.

<9012a> Connect USVI Stage 2 Fixed – Community Anchor Institutions

Indicate if the carrier newly deployed broadband service to community anchor institution(s) in the previous calendar year.

<9012b> Please Provide Attachment

Using link, download template and list the number, name and address for each community anchor institution. Attach the document which contains the community anchor institution details as required by 47 C.F.R. § 54.313(e)(2)(i)(A).

Name of Attached
Document Listing Required
Information

Connect USVI Stage 2 Fixed – FCC Form 470 Postings

<9013> For the filing due July 1 following full implementation of this requirement answer yes, no, or not applicable to this certification request.

Connect USVI Stage 2 Fixed – Post-Final Deployment Milestone Performance Certification

<9014> Starting the first July 1st after meeting the final service milestone, certify (yes or no) that the Connect USVI Fund Stage 2-funded network that the Stage 2 recipient operated in the prior year meets the relevant performance requirements in § 54.309.

Connect USVI Stage 2 Fixed – Support Reimbursement Certification

<9020> 54.313(n): Recipients of Connect USVI Fund Stage 2 fixed support shall certify that such support was not used for costs that are (or will be) reimbursed by other sources of support, including of federal or local government aid or insurance reimbursements; and that support was not used for other purposes, such as the retirement of company debt unrelated to eligible expenditures, or other expenses not directly related to network restoration, hardening, and expansion consistent with the framework of the Connect USVI Fund.

Connect USVI Stage 2 Fixed – Disaster Preparedness and Response Documentation

<9030> 54.313(n): Recipients of fixed support from Stage 2 of the Connect USVI Fund shall certify that they have conducted an annual review of the documentation required by section 54.1515(a)-(c) to determine the need for and to implement changes or revisions to disaster preparation and recovery documentation.

Connect USVI Fund Stage 2 Mobile - Support Reimbursement Certification

<9040> 54.313(n): Recipients of Connect USVI Fund Stage 2 mobile support shall certify that such support was not used for costs that are (or will be) reimbursed by other sources of support, including of federal or local government aid or insurance reimbursements; and that support was not used for other purposes, such as the retirement of company debt unrelated to eligible expenditures, or other expenses not directly related to network restoration, hardening, and expansion consistent with the framework of the Connect USVI Fund. Recipients of mobile support from Stage 2 of the Connect USVI Fund shall certify that they have conducted an annual review of the documentation required by section 54.1515(a)-(c) to determine the need for and to implement changes or revisions to disaster preparation and recovery documentation.

Connect USVI Fund Stage 2 Mobile - Disaster Preparedness and Response Documentation

<9050> 54.313(n): Recipients of mobile support from Stage 2 of the Connect USVI Fund shall certify that they have conducted an annual review of the documentation required by section 54.1515(a)-(c) to determine the need for and to implement changes or revisions to disaster preparation and response documentation.

Connect USVI Fund Stage 2 Mobile - Mobile Disbursements Certification

<9060> 54.313(o): Recipients of Connect USVI Fund Stage 2 mobile support shall certify that they are in compliance with all requirements for receipt of such support to continue receiving Stage 2 mobile disbursements.

Certification - Reporting Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 December 2020
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<010> Study Area Code	249027
<015> Study Area Name	Airvoice Wireless LLC
<020> Program Year	2022
<030> Contact Name - Person USAC should contact regarding this data	Melissa Kallabat
<035> Contact Telephone Number - Number of person identified in data line <030>	2482391061 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	Mkallabat@airvoicewireless.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients	
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Certification - Agent / Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 December 2020
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<010> Study Area Code	249027
<015> Study Area Name	Airvoice Wireless LLC
<020> Program Year	2022
<030> Contact Name - Person USAC should contact regarding this data	Melissa Kallabat
<035> Contact Telephone Number - Number of person identified in data line <030>	2482391061 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	Mkallabat@airvoicewireless.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I certify that (Name of Agent) <u>Expert Telecom Compliance</u> is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent:	Expert Telecom Compliance
Name of Reporting Carrier:	Airvoice Wireless LLC
Signature of Authorized Officer:	CERTIFIED ONLINE Date: 06/22/2021
Printed name of Authorized Officer:	Jim Bahri
Title or position of Authorized Officer:	CEO
Telephone number of Authorized Officer:	2483453900 ext.
Study Area Code of Reporting Carrier:	249027 Filing Due Date for this form: 07/01/2021
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier:	Airvoice Wireless LLC
Name of Authorized Agent Firm:	Expert Telecom Compliance
Signature of Authorized Agent or Employee of Agent:	CERTIFIED ONLINE Date: 06/16/2021
Name of Authorized Agent Employee:	Maddy Roberts
Title or position of Authorized Agent or Employee of Agent:	Regulatory Specialist
Telephone number of Authorized Agent or Employee of Agent:	7702329200 ext.
Study Area Code of Reporting Carrier:	249027 Filing Due Date for this form: 07/01/2021
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Certify Filing Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 December 2020
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<010>	Study Area Code	249027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2022
<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kallabat
<035>	Contact Telephone Number - Number of person identified in data line <030>	2482393063 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Mkallabat@airvoicewireless.com

I certify under penalty of perjury that no universal service support has been or will be used to purchase, obtain, maintain, improve, modify, or otherwise support any equipment or services produced or provided by any company designated by the Federal Communications Commission as posing a national security threat to the integrity of communications networks or the communications supply chain since the effective date of the designation.

Yes

Please Provide Waiver Document
Allowable File Type (pdf only)

Name of Attached Document Listing Required
Information

Attachments